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Safeguarding / Protecting Vulnerable Adults Policy

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1. Introduction

The **Care Act 2014**, implemented in April 2015, established the first statutory framework for adult safeguarding. It mandates local authorities to investigate allegations of abuse or neglect. Safeguarding efforts are primarily focused on adults with care and support needs who may be at risk of harm.

Safeguarding is a shared responsibility requiring collaboration across services to identify and support those at risk.

A vulnerable adult is any person aged 18 or over who:

- Is, or may be, in need of community care services due to mental, physical, or learning difficulties, age, or illness; and
- Is, or may be, unable to take care of themselves or protect themselves from harm or exploitation.

Context at Leaside

Leaside occasionally delivers outreach training sessions and workshops that may include participants considered vulnerable adults. While these individuals are typically accompanied by carers or healthcare professionals, there are instances where Leaside staff may have unsupervised responsibility for their welfare for short periods.

2. The Importance of Safeguarding

Care providers have a duty to enable people to live full, independent lives, free from abuse. Good care includes:

- Respecting person-centred approaches
- Preventing abuse and minimizing risk
- Responding appropriately if abuse occurs

Safeguarding encompasses a wide spectrum—from those unable to manage daily life to those temporarily affected by illness or disability. Given this complexity, responsibility must be shared across all involved parties.

3. The Mental Capacity Act (MCA) 2005

The MCA provides a legal framework for acting on behalf of individuals who may lack capacity. It is supported by a Code of Practice and is key to safeguarding.

Five Key Principles of the MCA:

1. **Presumption of Capacity** – Assume capacity unless proven otherwise.
2. **Support to Make Decisions** – Offer help before concluding someone cannot decide.
3. **Unwise Decisions Do Not Indicate Lack of Capacity** – People have the right to make decisions others may consider unwise.
4. **Best Interests** – Any act on behalf of someone who lacks capacity must be in their best interest.
5. **Least Restrictive Option** – Always use the least restrictive option to achieve desired outcomes.

Where capacity is lacking, any restrictive intervention must be necessary, proportionate, and documented within the person's care plan.

4. Scope of This Policy

This policy applies to all individuals working for or on behalf of Leaside, including:

- Employees
- Officers
- Agency workers
- Contractors or consultants
- Volunteers and interns

5. Recognition of the Abuse and Neglect of Vulnerable Adults

Safeguarding means protecting a vulnerable adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect while at the same time making sure that the vulnerable adult's wellbeing is promoted including having regard to their views, wishes, feelings and beliefs in deciding on any action. This must recognise that vulnerable adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances. Leaside will work with the professionals involved and the adult at risk to establish what being safe means to them.

Consideration needs to be given to a number of factors. Abuse may consist of a single act or repeated acts. It may be physical, verbal or psychological. It may be an act of neglect or an omission to act or it may occur when a vulnerable person is persuaded to enter into a financial or sexual transaction to which they have not consented to or cannot consent. Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it. The following categories of abuse are taken directly from the Care Act.

Physical Abuse - assault, hitting, slapping, pushing and misuse of medication, restraint or inappropriate physical sanctions.

Domestic Violence - psychological, physical, sexual, financial, emotional abuse, or honour-based violence.

Sexual Abuse - rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting.

Psychological Abuse - emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.

Financial or Material Abuse - theft, fraud, internet scamming, coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

Modern Slavery - slavery, human trafficking and forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.

Discriminatory Abuse - forms of harassment, slurs or similar treatment because of race, gender and gender identity, age, disability, sexual orientation or religion.

Institutional Abuse - neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

Neglect and Acts of Omission - ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.

Self-Neglect - this covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding.

It is important to note that any or all of these types of abuse may be perpetrated as the result of deliberate intent, negligence or ignorance.

6. Prevention of Radicalisation of Vulnerable People

Radicalisation is the process by which individuals, including both adults and children, are influenced to support terrorism or violent extremism. This often involves exploiting personal vulnerabilities—typically by a third party with a particular agenda. Radicalisation can occur face-to-face, through social media, or via other online platforms.

The Prevent Strategy

Prevent is one strand of the UK's counter-terrorism strategy, aimed at stopping people from becoming terrorists or supporting terrorism. It focuses on:

- Responding to the ideological challenges of terrorism and extremism.
- Providing practical support and guidance to prevent people from being drawn into terrorism.
- Promoting a multi-agency approach involving sectors like education, criminal justice, faith, health, charities, and the internet.

Prevent addresses all forms of terrorism, including Far Right extremism and some aspects of non-violent extremism. It works closely with the Police, Local Authorities, Government Departments, and health services.

Channel is a multi-agency safeguarding programme within Prevent. It supports individuals at risk of being drawn into violent extremism. The process includes:

- Identifying individuals at risk.
- Assessing the level and nature of the risk.
- Referring cases to a multi-agency panel for a tailored support plan.

Leaside's Role in Prevent

Staff must remain vigilant for signs of radicalisation. Concerns might include overhearing conversations where a service user is encouraged to fund or support extremist activity. In such cases, staff must follow Leaside's safeguarding referral pathway and contact the Safeguarding or Prevent Lead for advice.

Important: Prevent operates in the *pre-criminal space*, meaning its focus is on early intervention before any crime is committed.

7. What to Do If You Have Concerns About a Vulnerable Adult's Welfare

Any concerns about the welfare or safety of a vulnerable adult must be taken seriously—even if the alert is raised anonymously.

Reporting Concerns

- Concerns must be reported **as soon as possible** and always **within the same working day** to Leaside's Safeguarding Lead.
- If you cannot contact the internal Safeguarding Lead, refer the matter to the **Local Authority Safeguarding Team** immediately.
- If a disclosure is made by an adult at risk, reassure them the concern will be taken seriously. Clearly explain the next steps.

Confidentiality and Consent

- You must inform the person that while their confidentiality will be respected, you have a **duty to report** the concern.

- Consent is not required if:

    - Others are at risk.
    - A crime may have been committed.
    - There is concern for significant harm (a public interest disclosure).

Consent should only be deemed valid if the adult has the **mental capacity** to understand the risks and implications.

Raising a Safeguarding Alert

If you witness, suspect, or receive a disclosure of abuse or neglect:

- Do **not** contact the alleged perpetrator.
- Do **not** initiate an investigation.
- Record the disclosure **accurately**, using the vulnerable adult's own words where possible.
- Raise an alert with Leaside's Safeguarding Lead or the Local Authority Safeguarding Team.

You should consider:

- Is the adult still in the location where abuse is suspected?
- Will the alleged perpetrator have further access?
- What immediate risk exists?

A **preliminary risk assessment** must be carried out to ensure immediate protection and prevent further harm.

8. Information Required for Raising an Alert

Be prepared to provide:

- Name of the alleged victim.
- Name of the alleged perpetrator.
- What happened, when, and where.
- Any witnesses.
- Frequency or pattern of incidents.

9. Investigation and Next Steps

- The Safeguarding Team will decide whether to initiate a multi-agency safeguarding response.
- An individualised risk and support plan will be developed.
- All safeguarding alerts must be recorded accurately and promptly in care records, including the use of **body maps** for injuries.

10. Managing Allegations Against Staff

Any allegation of abuse by a staff member will be taken seriously. This includes:

- Immediate suspension (if necessary) pending investigation.
- Formal notification and cooperation with the Police and Local Authority.
- Maintaining confidentiality and fairness throughout the process.

Suspension is not automatic but may be required where:

- There is reason to believe abuse or neglect occurred.
- The allegation may warrant police investigation.
- The seriousness may result in disciplinary action.

Important:

- The disciplinary process is separate from any police investigation.
- Settlement agreements must **not** be used in safeguarding matters.
- Allegations must be investigated regardless of resignation, sick leave, or refusal to cooperate.

If abuse is substantiated, referrals may be made to:

- The **Disclosure and Barring Service (DBS)**.
- **Professional or regulatory bodies**.
- The **Local Authority Designated Officer (LADO)**.

11. Whistleblowing and Complaints

Leaside supports a culture where staff feel safe to raise concerns—whether about safeguarding or inappropriate behaviour.

- Refer to Leaside's **Whistleblowing Policy** (Employee Handbook).
- All complaints from service users or families must be taken seriously and referred through the appropriate complaints procedure.

- Complaints may trigger a safeguarding referral or fall under managing allegations procedures.

12. Information Sharing

Information sharing is crucial to safeguarding. Always consider the **safety and wellbeing** of the vulnerable adult as the top priority.

Seven key principles:

1. **The Data Protection Act is not a barrier** to appropriate information sharing.
2. Be **open and honest** unless it is unsafe or inappropriate to do so.
3. **Seek advice** when in doubt, without revealing identities unnecessarily.
4. **Share with consent** where appropriate, but override if necessary in the public interest.
5. Make decisions based on **safety and wellbeing**.
6. Ensure information is **necessary, relevant, accurate, timely and secure**.
7. **Record** all decisions to share or withhold information, including reasons and outcomes.

13. Attendance at Safeguarding Meetings

Leaside is committed to contributing to multi-agency safeguarding meetings.

- Attendance by the Leadership Team or Safeguarding Lead is a priority.
- If unavailable, a senior representative must attend, with a **written report provided**.

14. Staff Training

To protect vulnerable adults from harm, all staff must possess the appropriate knowledge to identify individuals at risk of, or experiencing, abuse or neglect and to take action appropriate to their role.

Leaside will:

- Provide **safeguarding training** to all employees.
- Include safeguarding as part of **induction training** for all new staff.
- Require staff to **regularly refresh** their training to maintain awareness and competence.
- Expect employees to update their **individual Training Record** as evidence of completion.

Safeguarding will also be a regular topic in **team meetings**, ensuring all staff understand the policy, their responsibilities, and the correct steps to take if they have concerns about an adult's welfare.

15. Supervision of Staff

Staff working with vulnerable adults must have access to **regular supervision and support**. This ensures:

- Opportunities to raise and explore concerns.
- Support in managing the emotional impact of safeguarding work.
- Maintenance of **high standards of practice**, aligned with national and local guidance.
- Clarity about **roles, responsibilities**, and the **limits of professional discretion**.

Safeguarding issues must not be delayed until formal supervision. Any immediate concerns should be reported to the Safeguarding Lead as soon as they arise.

Supervision, team meetings, and appraisals provide opportunities for:

- Reflective practice.
- Learning from incidents and recommendations.
- Identifying **development needs**.

16. Organisational Commitment to Safeguarding

Safeguarding at Leaside is underpinned by strong relationships, clear accountability, and shared responsibility at every level, supported by:

- A **whole-organisation commitment** to safeguarding.
- Ongoing improvement driven by the **Leadership Team**.

- **Clear lines of accountability** for safeguarding activities.
- Development plans informed by the views of vulnerable adults and their families.
- Training and **continuing professional development** to ensure staff understand their own roles and the roles of others.
- Safe recruitment and **robust vetting procedures**.
- Effective **multi-agency working** and timely, relevant **information sharing**.

17. Breaches of Policy

Failure to comply with Leaside's Safeguarding Adults Policy may result in:

- **Disciplinary action**, up to and including dismissal, for employees.
- Termination of contract for non-employed staff or volunteers.

18. Key Definitions

Safeguarding means embedding practices across Leaside to ensure the protection of vulnerable adults whenever possible.

According to the **Department of Health (2011)** and the **Care Act (2014)**, six principles guide safeguarding practice:

1. **Empowerment**: Supporting adults to make their own decisions and give informed consent. Where consent is not possible (e.g., due to lack of capacity), decisions should still involve the person as far as possible and respect their values and beliefs.

2. **Protection**: Offering support to those at greatest risk. Staff have a responsibility to help service users protect themselves and to take proactive steps when someone is unable to do so.

3. **Prevention**: Acting to reduce the likelihood of abuse or neglect. This includes helping individuals understand and manage risks and ensuring the service environment reduces the chance of harm.

4. **Proportionality**: Ensuring that responses to abuse or neglect are the least intrusive, appropriate to the level of risk, and tailored to the individual's circumstances and wishes.

5. **Partnerships**: Working collaboratively with communities, services, and other agencies to prevent and respond to abuse. Multi-agency teamwork is essential for effective safeguarding.

6. **Accountability**: Ensuring transparency in all safeguarding practices. Leaside is accountable to service users, their families, commissioners, and partner agencies.

19. Vulnerable Adult (Care Act 2014 Definition)

A vulnerable adult is defined as a person who:

- Is aged 18 or over;
- Has needs for care and support (whether or not those needs are being met by a local authority);
- Is experiencing, or at risk of, abuse or neglect;
- And, as a result of those needs, is unable to protect themselves from abuse or neglect or the risk of it.

This can include (but is not limited to):

- Individuals with learning disabilities or mental health conditions (including dementia).
- Older adults who are frail or have physical or sensory disabilities.
- People living with severe physical illness.
- Individuals vulnerable due to their role as **carers**, particularly in situations of domestic violence, chronic illness, or substance misuse.

Support provided must be sensitive to a person's **physical and mental abilities**, **culture**, **religion**, **gender**, and **sexual orientation**—and should enable them to live a life free from violence, harassment, and degradation.